U.S. Department of State BUREAU OF CONSULAR AFFAIRS QUESTIONNAIRE INFORMATION FOR DETERMINING POSSIBLE LOSS OF U.S. CITIZENSHIP The following information is needed to determine your present citizenship status and possible loss of citizenship. Your U.S. citizenship can not be lost without an intent on your part to relinquish voluntarily your citizenship. You are advised to consult an attorney before completing this form. If you have any questions about the form, you should discuss them with a member of our consular staff before completing the form. You are requested to complete this form carefully. Use extra paper as needed and attach any supporting documents to this form.						
	PAR	TI				
1. Name (Last, First, MI)		2. Date of Birth	3. Place of Birth			
4. (a) Last U.S. Passport Number	(b) Issued at (Place)		(c) Issued on (Date) (mm-dd-yyyy)		
 5. If not born in the United States, did you acquire citizenship by birth outside the United States to U. S. citizen parent(s): Yes No; or Naturalization, naturalization petitions prior to 11/29/1990 were submitted to and adjudicated by a court. After that date they were submitted to and adjudicated by INS/USCIS. Yes No (a) Name of Naturalizing Court/Office						
Date (From) (mm-dd-yyyy) Date (To) (mm-dd-y			Country			
			•			
6. Have you: (a) been naturalized as a citizen of a foreign state? If yes, please provide a date (<i>mm-dd-yyyy</i>) and country						
(b) taken an oath or made an affirmation or other formal declaration of allegiance to a foreign state:						
If yes, please provide a date (mm-dd-yyyy) and country						
(c) served in the armed forces of a foreign state? Yes No (1) If so, what country?						
(2) Dates of Service (mm-dd-yyyy)						
(3) What was your highest rank?						
(d) accepted, served in, or performed the duties of any office, post or employment with the government of a foreign state?						
If yes, please provide dates of service and country with each post						
(e) renounced U.S. nationality at a U.S. Consulate or Embassy? If yes, provide a date and place						

each of the questions asked in item 6 above is "No," please sign b tary public. If you answered "Yes", to one or more of the question	elow before a Consular Officer at the U.S. Embassy or s asked in Item 6 above, please continue with PART II or III.
nd Sworn	
Signature	Date (mm-dd-yyyy)
Signature of Notary Public	Date (mm-dd-yyyy)
d be aware that under United States law, a untarily performs any of the acts specifie ing United States citizenship. If you volu 6 with the intent to relinquish United Sta tement before a Consular Officer at the U blic. The U.S. Consulate or Embassy will your loss of U.S. citizenship. If you belie either because the act you performed wa to relinquish U.S. citizenship, you should	ed in Part I, Item 6 with the intent of ntarily performed an act listed in ates citizenship, you may sign Part II .S. Embassy or Consulate or a prepare the forms necessary to eve loss of citizenship has not s not voluntary or because you did
PART II	
ATEMENT OF VOLUNTARY RELINQUISH	IMENT OF U.S. CITIZENSHIP
d Sworn	
	rformed the act of expatriation indicated in Part I, Item 6,
Signature	Date (<i>mm-dd-yyyy</i>)
Signature of Consular Officer	Date (mm-dd-yyyy)
PART III	
s" or "No":	
nal or citizen of any other country other than the United States?	Yes No
acquire that citizenship in the foreign country by:	Yes No
	tary public. If you answered "Yes", to one or more of the question

1

2. When did you first become aware that you might be a United States citizen (Give Approximate Date)?
3. How did you find out that you are a citizen of the United States? (For example, did you always know you were a U.S. citizen? If not, when did you learn about your citizenship? Did someone tell you that you are a U.S. citizen?)
 Describe as specifically as you can the act or acts you performed as indicated in Part I, Item 6. (a) If you checked YES to question 6A, by what means, or in what kind of proceeding, were you naturalized as a citizen of a foreign state?
(b) If you checked YES to question 6 A or B, what was the nature of the oath you took? What were the words used? If you have a copy of the oath please attach it.
(c) If you checked YES to question 6C, in what foreign armed services did you serve? What years? What ranks did you hold? What was the highest rank? What responsibilities did you have and what functions and activities were you engaged in? Did you take an oath? If so, describe the oath.
(d) If you checked YES to question 6D, for what foreign government did you work? For more than one? What was your job title or titles? What were your duties and responsibilities for each of the foreign government jobs you held? Did you take an oath, affirmation or declaration or allegiance in connection with the job? If so describe the oath, affirmation or declaration.
5. Describe in detail the circumstances under which you performed the act or acts indicated in Part 1, Item 6.
Did you perform the act or acts voluntarily? YES NO (a) If not, in what sense was your performance of the act or acts involuntary?
(b) What was your intent toward your U.S. citizenship in performing the act or acts?
Did you perform the acts with the intent to relinquish U.S. citizenship?

6. Did you know that by pe	erforming the act described in Part I, Item 6 you might lo	se U.S. citizenship? Please explain your answer.			
	to the country where you performed the act indicated in se, did you own property, did you have family or social ti	Part I, Item 6? For example, at the time you performed the act, did es, did you vote, etc.?			
	Irns? Do you maintain a profession, occupation or licen	a residence, have property, family or social ties, vote, file U.S. se in the United States? Have you registered your children as			
9. (a) What passport do you use to travel to and from the United States?					
(b) What passport do you use to travel to and from other countries?					
Your answers on this form will become part of the official record in your case. Before signing this form, you are advised to consult with an attorney, and to read over your answers to make certain that they are as complete and accurate as possible. If you would like to provide additional information you believe relevant to a determination of your citizenship status, and in particular to your intention or lack of intention to relinquish U.S. citizenship, you may attach separate sheets with that information.					
To complete the form, please sign below before a Consular Officer at the U.S. Embassy or Consulate or a notary public.					
Subscribed and Sworn					
[SEAL]	Signature	Date (mm-dd-yyyy)			
	Signature of Consular Officer	Date (mm-dd-yyyy)			

PRIVACY ACT STATEMENT

The information on this form is requested under the authority of 8 U.S.C. 1104, 1481, 1483, 1488, and 1501, and 22 U.S.C. 212. Although furnishing the information is voluntary, applicants may not be eligible for a U.S. passport or for relinquishment or renunciation of U.S. nationality if they do not provide the required information. The principal purpose of gathering this information is to determine if the individual performed a potentially expatriating act as defined in 8 U.S.C. 1481 voluntarily and with the intention of relinquishing U.S. nationality.

ROUTINE USES The information solicited on this form may be made available to foreign government agencies to fulfill passport control and immigration duties, to investigate or prosecute violations of law, or when a request for information is made pursuant to customary international practice. In the event a finding of loss of nationality is made, the information solicited on this form may be made available to the following federal agencies: U.S. Citizenship and Immigration Service (8 U.S.C. 1501); Internal Revenue Service (26 U.S.C. 6039G(e)(2)); Federal Bureau of Investigation (P.L. 103-159, 18 U.S.C. 922(d)(7), 18 U.S.C. 922(g)(7)). The information provided also may be released to federal, state or local agencies for law enforcement, counter-terrorism and homeland security purposes; to Congress and courts within their sphere of jurisdiction; and to other federal agencies for certain personnel and records management matters.

PAPERWORK REDUCTION ACT (PRA) STATEMENT

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time required for searching existing data sources, gather the necessary documentation, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: U.S. Department of State, A/ISS/DIR, 1800 G St. N.W., Washington, D.C. 20520.